

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC

ADDRESS (number and street)

PO Box 3986

Check if different  
than previously  
reported. (ACC)

Washington

DC

20027

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00235572

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y  
11 08 2016in the  
State of

UT

(d) 30-Day

POST-Election

Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
10 01 2016

through

M M / D D / Y Y Y Y Y Y  
10 19 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Miller, Julia, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Miller, Julia, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 26 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

## OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">1072637.29</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">1042379.93</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">37500.00</span>	<span style="border: 1px solid black; padding: 2px;">503304.34</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">1079879.93</span>	<span style="border: 1px solid black; padding: 2px;">1575941.63</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">20113.20</span>	<span style="border: 1px solid black; padding: 2px;">516174.90</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">1059766.73</span>	<span style="border: 1px solid black; padding: 2px;">1059766.73</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
10 / 01 / 2016

To:

M M / D D / Y Y Y Y Y  
10 / 19 / 2016

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5000.00

67750.00

(ii) Unitemized .....

0.00

54.34

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

5000.00

67804.34

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

32500.00

425500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

37500.00

493304.34

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

10000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

37500.00

503304.34

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

37500.00

503304.34

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	113.20	229674.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	113.20	229674.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	190000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	6500.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	90000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20113.20	516174.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20113.20	516174.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	37500.00	493304.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	6500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	37500.00	486804.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	113.20	229674.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	113.20	229674.90

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOURANI, MONZER, , ,**

Mailing Address 7670 WOODWAY DR, STE 100

City  
Houston

State  
TX

Zip Code  
77063-1527

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Medistar Corporation

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : AA02250B3A0C34A87A2B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 12

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMGEN PAC**

Mailing Address ONE AMGEN CENTER DRIVE

City  
NEWBURY PARK

State  
CA

Zip Code  
91320-1789

FEC ID number of contributing  
federal political committee.

**C** C00251876

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**10** / **19** / **2016**

**Transaction ID : ABDEB37B751464BE59E6**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Davita Inc. PAC**

Mailing Address 601 Hawaii Ave

City  
Torrance

State  
CA

Zip Code  
90503-5141

FEC ID number of contributing  
federal political committee.

**C** C00340943

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**10** / **19** / **2016**

**Transaction ID : AA9C938CE158F48C9AE2**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AXA EQUITABLE LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE (AXA PAC)**

Mailing Address 1290 AVENUE OF THE AMERICAS

City  
NEW YORK

State  
NY

Zip Code  
10104

FEC ID number of contributing  
federal political committee.

**C** C00161901

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

**10** / **19** / **2016**

**Transaction ID : AF5B275ED65FA44A5A58**

Amount of Each Receipt this Period

4000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 SEVENTH STREET, NW  
SUITE 700

City  
Washington

State  
DC

Zip Code  
20004-2801

FEC ID number of contributing  
federal political committee.

C

C00106146

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A3671A6C29D6948B7A8B**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. THE WALT DISNEY COMPANY EMPLOYEES PAC**

Mailing Address 425 3rd Street, SW  
Suite 1100

City  
WASHINGTON

State  
DC

Zip Code  
20024

FEC ID number of contributing  
federal political committee.

C

C00197749

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A5C67E9BF01FC4642AFF**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)**

Mailing Address 6700 LAS COLINAS BOULEVARD

City  
IRVING

State  
TX

Zip Code  
75039

FEC ID number of contributing  
federal political committee.

C

C00034132

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A56E36385DC1B447F97F**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

11000.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 12

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. SENIORS HOUSING PAC**

Mailing Address 5225 Wisconsin Avenue, NW  
Suite 502

City  
WASHINGTON

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

C00325332

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016

Transaction ID : A2E3D9A6D916144F3856

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ERNST & YOUNG PAC**

Mailing Address 1101 New York Ave NW

City

Washington

State

DC

Zip Code

20005-4269

FEC ID number of contributing  
federal political committee.

C

C00227744

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016

Transaction ID : AF56ECE6B92F2461097C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN COLLEGE OF RADIOLOGY ASSOC. PAC**

Mailing Address POLITICAL ACTION COMMITTEE

1891 PRESTON WHITE DR

City

Reston

State

VA

Zip Code

20191-4326

FEC ID number of contributing  
federal political committee.

C

C00343459

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016

Transaction ID : AAA3434A14B904FEFA7A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

12500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AMERICAN DENTAL PAC**

Mailing Address 1111 14th Street, NW  
Suite 1100

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

C00000729

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : A4EBA6A4E6F7E417BAD0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

2500.00

**TOTAL** This Period (last page this line number only)..... ►

32500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name (Last, First, Middle Initial)

**A. E. H. Murray Group, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	6		

Mailing Address 6510 ANNA MARIE COURT

City  
MC LEANState  
VAZip Code  
22101Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B3F8C213B8!

Amount of Each Disbursement this Period

81.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BANKCARD CENTER**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	1			2	0	1	6		

Mailing Address P.O. Box 30833

City  
Salt Lake CityState  
UTZip Code  
84130-0833Purpose of Disbursement  
Merchant Fees

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B9794A4EE4!

Amount of Each Disbursement this Period

31.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

113.20

**TOTAL** This Period (last page this line number only).....▶

113.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OPPORTUNITY AND RESPONSIBILITY RESTORED IN OUR NATION PAC**

Full Name (Last, First, Middle Initial)

**A. LIZ CHENEY FOR WYOMING**

Mailing Address P. O. BOX 697

City  
CASPERState  
WYZip Code  
82602Purpose of Disbursement  
Political Contribution

Candidate Name

Cheney, Elizabeth, , ,

Office Sought:



House



Senate



President

State: WY

District: 00

Disbursement For: 2016



Primary



General



Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2016

FEC Identification Number

C C00607556

Transaction ID : B79054ADA5

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NRSC TARGETED STATE VICTORY COMMITTEE**

Mailing Address 228 S WASHINGTON STREET SUITE 115

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
Political Contribution

Candidate Name

NRSC TARGETED STATE VICTORY COMMITTEE

Office Sought:



House



Senate



President

State:

District:

Disbursement For: 2016



Primary



General



Other (specify)

Other

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2016

FEC Identification Number

C C00617498

Transaction ID : B09852F4785

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:



House



Senate



President

State:

District:

Disbursement For:



Primary



General



Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20000.00

20000.00